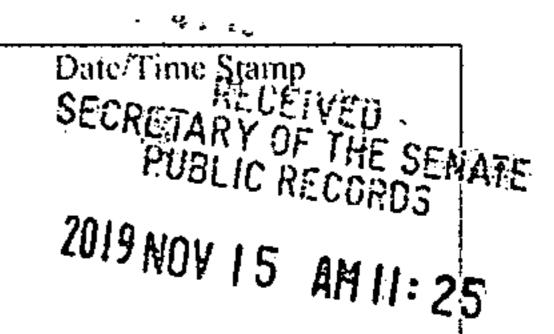


COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION



Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Name of Traveler: Bathany Poulos
Employing Office/Committee: Schator Marco Rubio
Travel Expenses Paid by (List all sources): Maaria Mo More
Travel Date(s): AUGUST 18-24, 7019 Description/Title of Attached Forms: RE-170000
Description/Title of Attached Forms: RE-170000
Purpose of Amendment (describe the reason for amending original submission): \\ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
an older, incomect version of this form. Attached is the comect version
Attached is the cornect version
11-14-19 Betherfacla
(Date) (Signature of Traveler)

(Revised 10/19/15)

Date/Time Stamp:

EMPLOYEE PRE-TRAVEL AUTHORIZATION

<u>Pre-Travel Filing Instructions</u>: Complete and submit this form at least 30 days prior to the travel departure date to the Select Committee on Ethics in SH-220. Incomplete and late travel submissions will <u>not</u> be considered or approved. This form <u>must</u> be typed and is available as a fillable PDF on the Committee's website at ethics.senate.gov. Retain a copy of your entire pre-travel submission for your required post-travel disclosure.

ETHIC MUST'19PH 4:13
Originally submitted July 10, 2019

Form RE-1

Name of Traveler:	Bethany Poulos
Employing Office/Committee:	Senator Marco Rubio (R-FL)
Private Sponsor(s) (list all): Malaria No More Fun	ıd
Travel date(s): August 18, 2019-August 24, 201 Note: If you plan to extend the trip for any red	
Destination(s): Kigali, Nyagatare District, and R	
Explain how this trip is specifically connected to the t	· · · · · · · · · · · · · · · · · ·
humanitarian issues, global women's issues, and global I Committee and Senate Appropriations Subcommittee on	I am responsible for issues relating to human rights, democracy, health. Senator Rubio is a member of the Senate Foreign Relations State, Foreign Operations, and Related Programs. This trip would allow dressing critical global health issues such as malaria, tuberculosis, and
Name of accompanying family member (if any): N/A Relationship to Employee: Spouse Child	
I certify that the information contained in this form is	true, complete and correct to the best of my knowledge:
7-31-19	Bethouries
(Date)	(S)gnature of Employee)
TO BE COMPLETED BY SUPERVISING SENATOR/OF Secretary for the Majority, Secretary for the Minority, and	FICER (President of the Senate, Secretary of the Senate, Sergeant at Arms, Chaplain):
Marco Rubio	Bethany Poulos
(Print Senator's/Officer's Name)	(Print Traveler's Name)
related expenses for travel to the event described above	ayment or reimbursement for necessary transportation, lodging, and re. I have determined that this travel is in connection with his or her ill not create the appearance that he or she is using public office for
I have also determined that the attendance of the emploid of the Senate. (signify "yes" by checking box) \boxed{x}	oyee's spouse or child is appropriate to assist in the representation
(Date)	(Signature of Supervising Senator/Officer)